

PRINTER RUSH

(PTO ASSISTANCE)

Application : <u>09 453 480</u>	Examiner : <u>E Kim</u>	GAU : <u>3731</u>
From: <u>mg</u>	Location: <u>IDC</u> FMF FDC	Date: <u>11.28.05</u>
Tracking #: <u>EPM 09 453 480</u> Week Date: <u>10.24.05</u>		

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>10.21.05</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE:

Renumbered claim 4 (orig claim 11) is incomplete. It does not end with a period.

Renumbered claims 5, 6, 7, 8 (orig claims 12, 13, 14, and 15, respectively) are missing.

Please provide the latest claims' set.

[XRUSH] RESPONSE: *COMPLETE SET OF CLAIMS IN FILE.*

SEE ITEM 26 "APPLICANT ARGUMENTS OR REMARKS" CORRECTED NOTICE OF ALLOWABILITY AND ISSUE CLASSIFICATION FORMS INCLUDED HEREIN.

INITIALS: *[Signature]* *CH*

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

Stephen F. Gerrity
Primary Examiner